| | | PART E | 3 - FEE(S) T | TRANSMITTAL O | 5-08-90 | 5 | |
|--|--|---|--|---|---|-----------------------------|--|
| or Fax | | | | Mail Stop ISSUE Commissioner fo P.O. Box 1450 Alexandria, Virg Fax (571)-273-2885 | FEE r Patents inia 22313-1450 | | |
| STRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All the correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicating a separate "FEE ADDRESS" for maintenance fee notifications. | | | | | | | |
| CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address) | | | | Note: A certificate of Fee(s) Transmittal. The papers. Each additional | Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission. | | |
| LSI LOGIC CORPORATION 1621 BARBER LANE MS: D-106 MIL DITAS: CA 05025 | | | | I hereby certify that the States Postal Service v | Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below. | | |
| MILPITAS, CA 95035 | | | | Connie | Connie del Castillo (Depositor's name) | | |
| 05/09/2006 CCHAU2 00000008 122252 10648054 | | | | Conn | Connical Casulto (Signature) | | |
| 01 FC:1501 1400.00 DA | | | | 5 | 5104106 (Date) | | |
| APPLICATION NO. | FILING DATE | | FIRST NAMED | INVENTOR | ATTORNEY DOCKET NO. | CONFIRMATION NO. | |
| 10/648,054 | 10/648,054 08/26/2003 Matthew Russ | | | Russell | 03-0154 | 2925 | |
| TITLE OF INVENTION: MULTI-LAYER STAGGERED POWER BUS LAYOUT DESIGN | | | | | | | |
| APPLN. TYPE | SMALL ENTITY | ISSUE FEE P | | PUBLICATION FEE | TOTAL FEE(S) DUE | DATE DUE | |
| nonprovisional | NO | \$1400 | | \$300 | \$1700 | 07/20/2006 | |
| EXAMINER | | ART UNIT CLASS-SUB | | CLASS-SUBCLASS | | | |
| ANDUJAR, LEONARDO | | 2826 257 | | 257-207000 | | | |
| Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. | | | 2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. 1 Trexler, Bushnell, Giangiorgi & Blackstone 2 Ltd. 3 | | | | |
| 3. ASSIGNEE NAME AND | | | | | | -,, | |
| PLEASE NOTE: Unless recordation as set forth in | an assignee is identified be 37 CFR 3.11. Completion | elow, no assignee of this form is NO | data will appea T a substitute fo | er on the patent. If an assign | ee is identified below, the | document has been filed for | |
| PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) | | | | | | | |
| LSI Logic Corporation Milpitas, CA | | | | | | | |
| Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government | | | | | | | |
| 4a. The following fee(s) are enclosed: 4b. Payment of Fee(s): | | | | | | | |
| Issue Fee | | | A check in the amount of the fee(s) is enclosed. | | | | |
| Publication Fee (No small entity discount permitted) Advance Order - # of Copies | | | Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 12-2252 (enclose an extra copy of this form). | | | | |
| 5. Change in Entity Status | (from status indicated above | :) | | | | | |

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

□ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

06

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.

Authorized Signature